

CHAPTER 8  
STANDARDS FOR PROGRAMS AND THE OPERATING A  
MOTOR VEHICLE WHILE INTOXICATED (OWI) LAW

**643—8.1(125) Definitions.** Unless otherwise indicated, the following definitions shall apply to the specific terms used in these rules:

*“Assessment”* means the ongoing process of identifying a diagnosis, ruling out other diagnoses, and determining the level of care needed by the client.

*“Department”* means the Iowa department of public health.

*“Evaluation”* means the process to evaluate the client’s strengths, weaknesses, problems, and needs for the purpose of defining a course of treatment. This includes use of a standardized placement screening and any additional patient/client profile information, and recommendation to an appropriate level of care.

*“Facility”* means a hospital, detoxification center, institution or program licensed under Iowa Code section 125.13, providing care, maintenance and treatment for substance abusers. “Facility” also includes the physical areas such as grounds, buildings, or portions thereof under direct administrative control of the program.

*“Licensed”* means issuance of a license by the department and the commission on substance abuse, which validates the licensee’s compliance with substance abuse program standards and authorizes the licensee to operate a substance abuse program in the state of Iowa.

*“Licensee”* means any program licensed by the department.

*“Posttreatment”* means continuing care after primary treatment has been completed.

*“Primary treatment”* means substance abuse treatment modality including inpatient, primary residential treatment, extended residential treatment, medically monitored residential, extended outpatient, intensive outpatient, and partial hospitalization.

*“Program”* means any individual, partnership, corporation, association, governmental subdivision or public or private organization.

*“Screening”* means the process by which a client/patient is determined at risk and in need of further evaluation. The focus is on the minimum criteria necessary for appropriateness/eligibility.

*“Shall”* means the term used to indicate a mandatory statement and the only acceptable method under the present standards.

*“Should”* means the term used in the interpretation of a standard to reflect the commonly accepted method, yet allowing for the use of effective alternatives.

*“Staff”* means any individual who provides services to the program on a regular basis as a paid employee, agent, consultant, or as a volunteer.

*“Substance abuser”* means a person who lacks self-control as to the use of chemical substances or uses chemical substances to the extent that the person’s health is substantially impaired or endangered or that the person’s social or economic function is substantially disrupted.

*“Treatment”* means the broad range of planned and continuing, inpatient, outpatient, residential care services, including diagnostic evaluation, counseling, medical, psychiatric, psychological, and social service care, which may be extended to substance abusers, concerned persons, concerned family members, or significant others, and which is geared toward influencing the behavior of such individuals to achieve a state of rehabilitation.

**643—8.2(125) Screening, evaluation, and treatment.** Persons who are convicted of operating a motor vehicle while intoxicated (OWI), Iowa Code section 321J.2, and persons whose driver's license or nonresident operating privileges are revoked under Iowa Code chapter 321J shall be assigned to undergo a substance abuse evaluation and, if recommended, treatment.

**8.2(1) Screening.** The initial screening shall consist of a generally accepted standardized substance abuse screening instrument. In addition, information on blood alcohol content at time of arrest, history of other alcohol or drug-related arrests; history of alcohol/drug treatment; history of mental health problems and treatment; any OWI arrest that included personal injury or additional charge(s); and family history of substance abuse shall be collected.

**8.2(2) Evaluation.** If the initial screening shows a potential for chemical dependency, then a further evaluation will be completed. This evaluation shall consist of further development of the six assessment dimensions outlined in the American Society of Addiction Medicine, Patient Placement Criteria for the Treatment of Substance-Related Disorders, Second Edition.

**8.2(3) Treatment.** Treatment will consist of a broad range of planned and continuing, inpatient, outpatient, residential care services, including ongoing diagnostic evaluation, counseling, medical, psychiatric, psychological, and social service care geared toward influencing the behavior of such individuals to achieve a state of rehabilitation. Individuals will be placed in the appropriate level of care in accordance with the American Society of Addiction Medicine, Patient Placement Criteria for the Treatment of Substance-Related Disorders, Second Edition.

**643—8.3(125) Screening, evaluation, and treatment completion.** Substance abuse screening, assessment, evaluation and treatment completion shall be reported to the department of transportation and to the district court in accordance with Iowa Code sections 125.37, 125.84 and 125.86 and the federal confidentiality regulations, "Confidentiality of Alcohol and Drug Abuse Patient Records," 42 CFR, Part 2, effective June 9, 1987.

**8.3(1) Reporting form.** Programs shall report screening, evaluation, and treatment completion utilizing the form "Notice Iowa Code 321J—Confidential Medical Record."

**8.3(2) Primary treatment.** Upon completion of primary treatment, programs shall report to the department of transportation and the courts that treatment has been completed.

**8.3(3) Posttreatment results.** If the court orders a posttreatment program, progress and attendance shall be reported to the person's probation officer or otherwise as ordered by the court.

**643—8.4(125) Cost of evaluation and treatment.**

**8.4(1) Screening and evaluation.** The cost of screening and evaluation shall be no more than \$100 and the individual shall be responsible for the costs of the screening and evaluation.

**8.4(2) Treatment.** A person admitted to the program pursuant to Iowa Code section 321J.3 who does not possess sufficient income or estate to make payment of the costs of the treatment in whole or in part shall be considered a state patient and eligible for state-funded treatment as provided in Iowa Code section 125.44. Programs should utilize the department's statewide sliding fee schedule to determine cost of treatment. There is no prohibition on any individual from paying in whole the cost of treatment.

**8.4(3) Reimbursement.** Programs shall be able to seek reimbursement of cost of screening, evaluation and treatment through an individual's insurance company, firm or corporation bound to pay, or Medicaid for individual eligible or enrolled.

**643—8.5(125) Timeliness.** Substance abuse evaluations and treatment shall be conducted and completed as soon as possible.

**643—8.6(125) Confidentiality.** Programs will abide by federal regulations, “Confidentiality of Alcohol and Drug Abuse Patient Records,” 42 CFR, Part 2, and Iowa Code section 125.37.

**643—8.7(125) Records.** Records shall be maintained for a minimum of five years after discharge or completion of screening, evaluation, or treatment, and then destroyed or maintained based on program’s written policy and procedure.

**643—8.8(125) Reciprocity.** For a resident of a state other than Iowa or an Iowa resident obtaining evaluation or treatment outside the state, screening, evaluation or treatment services shall be provided by programs licensed or approved by that state’s substance abuse authority. The results of the screening, evaluation and treatment shall be submitted to the Iowa department of public health, division of substance abuse and health promotion, for review and reporting purposes to the Iowa department of transportation.

These rules are intended to implement Iowa Code section 125.13.

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